

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ C C00489799		
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY					
Full Name of Payee Screen Strategies Media			Date of Public Distribution/Dissemination MM / DD / YYYYYY 06 / 02 / 2016		
Mailing Address 11150 Fairfax Blvd, Ste 550			Amount 15391.20		
City Fairfax	State VA	Zip Code 22030	Transaction ID : B604483 Date of Disbursement or Obligation MM / DD / YYYYYY 06 / 02 / 2016		
Purpose of Expenditure Radio Ad Buy/Estimated cost		Category/ Type 004			
Name of Federal Candidate Catherine Cortez-Masto			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought 74892.26			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee 76 Words			Date of Public Distribution/Dissemination MM / DD / YYYYYY 06 / 02 / 2016		
Mailing Address 1806 Vernon Street, Ste. #100			Amount 1085.10		
City Washington	State DC	Zip Code 20009	Transaction ID : B604484 Date of Disbursement or Obligation MM / DD / YYYYYY 06 / 02 / 2016		
Purpose of Expenditure Radio Ad Production/Estimated cost		Category/ Type 004			
Name of Federal Candidate Catherine Cortez-Masto			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought 74892.26			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			16476.30		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Deirdre Schifeling</u> <div style="text-align: right;">[Electronically Filed]</div>			Date MM / DD / YYYYYY 06 / 03 / 2016		